

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		<i>12/4/84</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>71471</i>	<i>1/5</i>

INDEX OF CLAIMS

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Rejected N Non-elected
 Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected


Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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Index of Claims 	Application/Control No. 09450609	Applicant(s)/Patent Under Reexamination WEIBEL ET AL.
	Examiner Kim, Jennifer	Art Unit 1617

✓	Rejected	-	Cancelled	N	Non-Elected	A	Appeal
=	Allowed	÷	Restricted	I	Interference	O	Objected

☐ Claims renumbered in the same order as presented by applicant
 ☐ CPA
 ☐ T.D.
 ☐ R.1.47

CLAIM		DATE									
Final	Original	02/04/2007									
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